

## Young Carers Profile

Name:.....

D.O.B:.....Year Group:.....

School.....

Are you happy for this information to be shared with people who can support you?

Yes / No

I do / do not attend Fife Young Carers support groups

I do / do not have a Young Carers Authorisation Card

I care for.....

At home I have to:.....

These people already help me and my family:

My Caring Role means:

I find it hard to complete homework on time

It is hard to concentrate in class

Other, please state.....

## A day in my life:

Before School:

During School:

After School:

At weekends:

05/04/2020

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This form was filled in by..... Date: .....

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fZSf kag USdMgf; i a` yfWkag Zai ; dS^kS\_ [` Xa` faXafZWbWbW